

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

| | | | | | | | | | | | | | | | | | | |
|--|--|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
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| Root Cause | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Design | | | | | | | | | |
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Handling/Pre | | | | | | | | | |
| Material | | | | | | | | | |
| Operator | | | | | | | | | |
| Offset/Setup | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Transport | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| | | | |
|--|--|---|--|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence | <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|--|--|---|--|

Work Order ID 123438

123438

Page 2

Thursday, August 07, 2014 11:15:37 AM

Item ID: D3290-3 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: Window
Start Date: 8/07/14 Start Qty: 8.00 ***8*** Cust Item ID:
Required Date: 8/07/14 Req'd Qty: 8.00 ***8*** Customer:
Reference:

Approvals: Process Plan: Date: Tooling: Date: Run Start ***NR1***
QC: Date: SPC (Y/N): Date: Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|-------------------------------|
| 130 *130* Thermoform Thermoforming Machine | HAND FINISHING THERMOFORMING Memo Without removing protective skinremove sharp edge by deburring. | 0.00 0.00 | | | | 9 | | | DAS 07 9-89 14/09/22 |
| 140 *140* Thermoform Thermoforming Machine | THERMOFORMING MACHINE Memo 1-THERMOFORM as per Drawing D3290 and Folio FTA001 Dwg. Rev. <u>C</u> Folio Rev <u>B</u> Visually inspect part for proper formation & texture | 0.00 0.00 | | | | 9 | | | DAS 07 9-89 14/09/22 |

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| Root Cause | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
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| Design | | | | | | | | | |
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Handling/Pre | | | | | | | | | |
| Material | | | | | | | | | |
| Operator | | | | | | | | | |
| Offset/Setup | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
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FAULT CATEGORY

| | | |
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Work Order ID 123438

123438

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Thursday, August 07, 2014 11:15:37 AM

Item ID: D3290-3 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Window
 Start Date: 8/07/14 Start Qty: 8.00 ***8*** Cust Item ID:
 Required Date: 8/07/14 Req'd Qty: 8.00 ***8*** Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--|--|----------------------|---------|--------|--------------|---------------|---------------|------------------|-------------------------------|
| 170 *170* Thermoform Thermoforming Machine | HAND FINISHING THERMOFORMING Memo 1) Water sand and buff to remove scratches if required 2) Engrave P/N "D3290-3" and B/N on lower edge. Use 0.125" high letters to maximum depth of 0.005" | 0.00 0.00 | | | | 9 | | | DAS 07 9-89 14/09/22 |
| 175 *175* QC Quality Control | QC2- Inspect parts off machine FAI/FAIB Memo | 0.00 0.00 | | | | | | | DAS 07 9-89 |
| 180 *180* QC Quality Control | QC5- Inspect part completeness to step on W/O Memo | 0.00 0.00 | | | | 9 | | | DAS 38 9-89 14-9-23 |

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| Root Cause | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
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| Material | | | | | | | | | |
| Operator | | | | | | | | | |
| Offset/Setup | | | | | | | | | |
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| Training | | | | | | | | | |
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FAULT CATEGORY

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| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence |
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Work Order ID 123438

123438

Page 4

Thursday, August 07, 2014 11:15:37 AM

Item ID: D3290-3 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: Window
 Start Date: 8/07/14 Start Qty: 8.00 *8* Cust Item ID:
 Required Date: 8/07/14 Req'd Qty: 8.00 *8* Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 190 | Identify as per dwg & Stock Location: _____ | 0.00 | | | | | | | |
| *190* | | | | | | | | | |
| Packaging | Memo | 0.00 | | | | | | | |
| Packaging | | | | | | | | | |
| 200 | QC21- Final Inspection - Work Order Release | 0.00 | | | | | | | |
| *200* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | | | | | | | | | |

DAS
32
9-89

17/2/23 (9)

MLJ 14-09-24

14-9-23

DQA: _____ Date: _____



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|--|--|---|--|

Picklist Print

Page 1

Thursday, August 07, 2014 11:15:36 AM

Work Order ID: 123438

123438

Parent Item: D3290-3

D3290-3

Parent Item Name: Window

Start Date: 8/07/14

Required Date: 8/07/14

Start Qty: 8.00

Required Qty: 8.00

Comments: IPP A04.08.18New issueKJ/RF
 IPP B06.05.09Ecn 798 EC IPP Rev.
 C Removed QC8 Step 160 11/04/11 DL
 IPP C 07.05.29. Thermoform in-house DL
 IPP D 07.09.28 rev C dwg EC verified by: DD
 IPP E 07.11.28 Add --Hand finish deburring DL

| Component Item ID/ Item Name | Replacement Item ID | Mfg/ Purch | Bin Item | Primary Location | Last Location | Route Seq ID | Unit of Measure | Qty on Hand | Qty per Kit | Total Qty | Qty Issued | Date Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|

| | | | | | | | | | | | | | |
|------------------------|--|-----------|----|--|--|-----|----|----------|-----------|-------------|--|-------------|---------|
| MACRLICS.125 | | Purchased | No | | | 100 | sf | 145.0000 | 3 | 25.26316 | | | |
| *MACRIC S 125* | | | | | | | | | ** | (32) | | DAS | |
| 1/8" Polycast II Sheet | | | | | | | | | | | | 23 | 14-09-9 |
| | | | | | | | | | | | | 9-89 | |

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| MAT018 | 145 | |
| 123895 | 58 | |
| m129147 | 87 | |
| 130047 | | |

130047.

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

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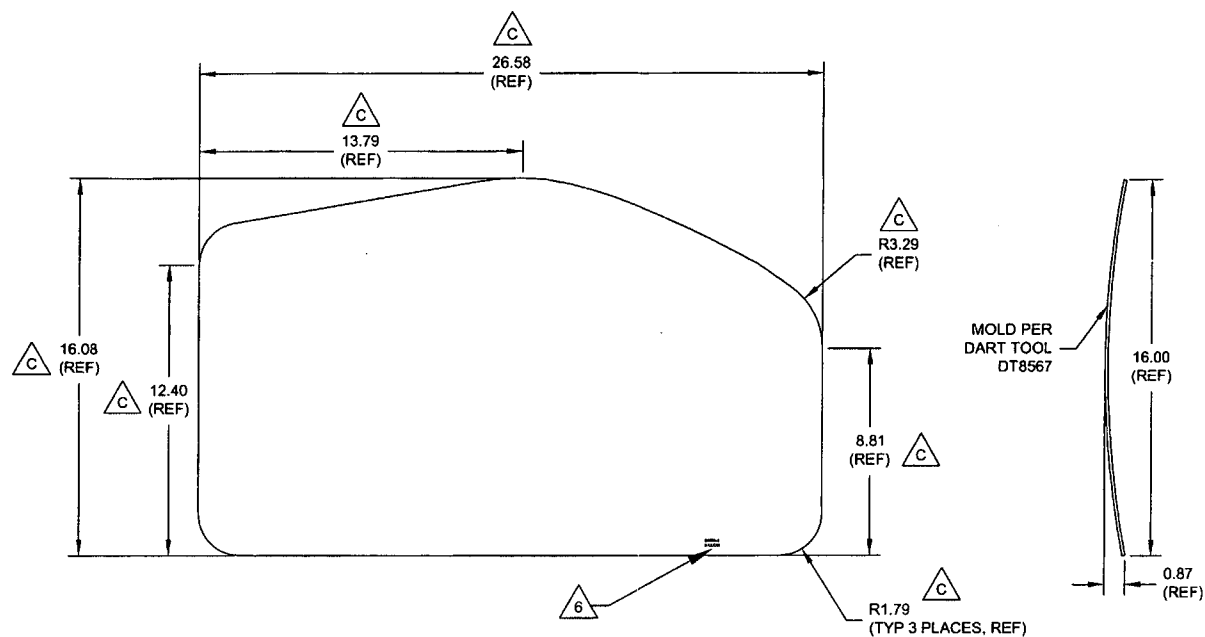
Work Order update only ☐

| | | | | | | | | | | | | | | | | | | |
|--|--|--|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Design | | | | | | | | | |
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Handling/Pre | | | | | | | | | |
| Material | | | | | | | | | |
| Operator | | | | | | | | | |
| Offset/Setup | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Transport | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| | | | |
|--|--|---|--|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence | <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|--|--|---|--|



D3290-3 WINDOW







D3290-3 NOTES:

- 1) MATERIAL: POLYCAST II CLEAR ACRYLIC SHEET PER MIL-P-5425
OR PLEXIGLAS G CLEAR CAST ACRYLIC SHEET PER
LP-391 TYPE 1 GRADE C, 0.125 THICK
(REF. DART SPEC. M-ACRYLIC-S.125)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) REMOVE SHARP EDGES
- 6) IDENTIFICATION: ENGRAVE P/N "D3290-3" AND B/N ON LOWER EDGE
USE 0.125" HIGH LETTERS TO MAXIMUM DEPTH OF 0.005"
- 7) WEIGHT: 1.87 +/- 0.42 LBS
- 8) MOLD PER DART TOOL DT8567

UNDER REVIEW

DEO ATTACHED

RELEASED

| | | | |
|--|---|--|--------------|
| DESIGN |  | DART AEROSPACE LTD | |
| DRAWN |  | HAWKESBURY, ONTARIO, CANADA | |
| CHECKED |  | DRAWING NO. | REV. C |
| MFG. APPR. |  | D3290 | SHEET 2 OF 2 |
| APPROVED |  | TITLE | SCALE |
| DE APPR. |  | REPLACEMENT WINDOW ASSEMBLY 1: | |
| DATE | 07.07.24 | COPYRIGHT © 2004 BY DART AEROSPACE LTD | |
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| | | | | | | | |
|----------------------|--------------------------------------|---------------------|---|-------------------|-------------------------|---------------------------|--------------|
| DRAWING NO. D3290 | TITLE REPLACEMENT WINDOW ASSEMBLY | REV. C | DART AEROSPACE LTD ENGINEERING ORDER | | D.E.O. NO. D3290-C-1 | SHEET NO. SHEET 1 OF 1 | SCALE NTS |
| DRAWN <i>q</i> | CHECKED <i>h</i> | MFG. APPR. <i>E</i> | APPROVED <i>AD</i> | DE APPR. <i>#</i> | | | |
| DATE 09.09.18 | DATE 09.09.18 | DATE 09.09.18 | DATE 09/09/21 | DATE 09/09/21 | | | |

PURPOSE:

CHANGE MATERIAL THICKNESS OF D3290-1 FRAME TO 0.063 FROM 0.040. REF PAR 09-033.

CHANGE:

MATERIAL CALL-OUT OF D3290-1 FRAME ON SHEET 1 IS AMENDED AS FOLLOWS:

D3290-1 NOTES

- 1) MATERIAL: 6061-T6 (OR 6061-T62) ALUMINUM SHEET ~~0.040 THICK~~ 0.063 THICK (REPLACE)
 PER AMS-QQ-A-250/11 OR AMS 4025 OR AMS 4027
~~(REF. DART SPEC. M6061T6S.040)~~ REF. DART SPEC. M6061T6S.063 (REPLACE)
 OR
 5052-H32 ALUMINUM SHEET ~~0.040 THICK~~ 0.063 THICK (REPLACE)
 PER AMS-QQ-A-250/8 OR AMS 4016
~~(REF. DART SPEC. M5052H32S.040)~~ REF. DART SPEC. M5052H32S.063 (REPLACE)

RELEASED
 2009 -10- 09
WTP

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